

**FEC
FORM 3P****REPORT OF RECEIPTS
AND DISBURSEMENTS**BY AN AUTHORIZED COMMITTEE OF A CANDIDATE
FOR THE OFFICE OF PRESIDENT OR VICE PRESIDENT

Office Use Only

1. NAME OF COMMITTEE (in full, type or print)

Example: If typing, type over the lines.

12FE4M5

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

ADDRESS (number and street)

C/O JOHN GROSS

11 TIMES SQUARE

Check if different
than previously
reported. (ACC)

NEW YORK

NY

10036-8299

CITY

STATE

ZIP CODE

2. FEC IDENTIFICATION NUMBER

C

C00430512

3. THIS REPORT IS FOR Primary☐

or General

☐**4. TYPE OF REPORT** (Choose One)

Check here if this is a Termination Report (TER)

☐Quarterly Reports:

April 15 (Q1)



October 15 (Q3)



July 15 (Q2)



January 31 Year-End Report (YE)

Monthly Reports:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)



Nov 20 (M11)



Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)



Dec 20 (M12)



Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)



Thirtieth day report following the General Election

on

MM /

DD /

YYYYYY



Twelfth day report preceding

election

on

MM /

DD /

YYYYYY

in the State of

.

Is this Report an Amendment?



yes



no

5. Covering Period

MM /

DD /

YYYYYY

04 / 01 / 2013

through

MM /

DD /

YYYYYY

06 / 30 / 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

John Gross

Signature of Treasurer

John Gross

[Electronically Filed]

Date

MM /

DD /

YYYYYY

07 /

15 /

2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.
All previous versions of this form are obsolete and should no longer be used.Office
Use
Only

Write or Type Committee Name

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

Report Covering the Period:

From:

MM / DD / YYYY
04 / 01 / 2013

To:

MM / DD / YYYY
06 / 30 / 2013**SUMMARY**

6. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	18371.34
7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 3)	30690.83
8. SUBTOTAL (Lines 6 and 7)	49062.17
9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2)	36122.11
10. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 9 from 8).....	12940.06
11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P).....	0.00
12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P).....	1747854.54
13. EXPENDITURES SUBJECT TO LIMITATION	0.00

NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES

14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2)	105000.00
15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2).....	146477.60

DETAILED SUMMARY PAGE of Receipts

NAME OF COMMITTEE (in Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

Report Covering the Period:

From:

M M / D D / Y Y Y Y
04 / 01 / 2013

To:

M M / D D / Y Y Y Y
06 / 30 / 2013

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
16. FEDERAL FUNDS (Itemize on Schedule A-P)	0.00	0.00
17. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) itemized	0.00	0.00
(ii) unitemized	0.00	0.00
(iii) Total contributions	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(d) The Candidate	25000.00	105000.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a), 17(b), 17(c) and 17(d))	25000.00	105000.00
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOANS RECEIVED:		
(a) Loans Received From or Guaranteed by Candidate	0.00	0.00
(b) Other Loans	0.00	0.00
(c) TOTAL LOANS (Add 19(a) and 19(b))	0.00	0.00
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.):		
(a) Operating	1014.83	5762.88
(b) Fundraising	0.00	0.00
(c) Legal and Accounting	0.00	0.00
(d) TOTAL OFFSETS TO EXPENDITURES (Add 20(a), 20(b) and 20(c))	1014.83	5762.88
21. OTHER RECEIPTS (Dividends, Interest, etc.)	4676.00	6601.18
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d) and 21)	30690.83	117364.06

DETAILED SUMMARY PAGE

FEC Form 3P (Rev. 03/2011)

of Disbursements and Contributed Items

PAGE 4 / 27

NAME OF COMMITTEE (in Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

Report Covering the Period:

From:

M M / D D / Y Y Y Y
04 / 01 / 2013

To:

M M / D D / Y Y Y Y
06 / 30 / 2013**II. DISBURSEMENTS****COLUMN A
Total This Period****COLUMN B
Calendar Year-to-Date**

23. OPERATING EXPENDITURES.....	36122.11	152240.48
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
25. FUNDRAISING DISBURSEMENTS	0.00	0.00
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS.....	0.00	0.00
27. LOAN REPAYMENTS MADE:		
(a) Repayments of Loans made or Guaranteed by Candidate.....	0.00	0.00
(b) Other Repayments	0.00	0.00
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b)).....	0.00	0.00
28. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b) and 28(c))	0.00	0.00
29. OTHER DISBURSEMENTS	0.00	0.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	36122.11	152240.48

**III. CONTRIBUTED ITEMS
(Stock, Art Objects, Etc.)**

31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)	0.00	
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FEC FORM 3P,
Federal Election Commission
999 E Street, N.W.
Washington, D.C. 20463

**ALLOCATION OF PRIMARY EXPENDITURES
BY STATE FOR
A PRESIDENTIAL CANDIDATE**
(Used Only by Primary Committees Receiving
or Expecting To Receive Federal Funds)

Office Use Only

1. NAME OF COMMITTEE (in full, type or print)

2. FEC IDENTIFICATION NUMBER

C C00430512

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

ADDRESS (number and street)

C/O JOHN GROSS

11 TIMES SQUARE

NEW YORK

CITY

NY

STATE

10036-8299

ZIP CODE

3. NAME OF CANDIDATE

ALLOCATION BY STATE

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Alabama	0.00	0.00
Alaska	0.00	0.00
Arizona	0.00	0.00
Arkansas	0.00	0.00
California	0.00	0.00
Colorado	0.00	0.00
Connecticut	0.00	0.00
Delaware	0.00	0.00
District of Columbia	0.00	0.00
Florida	0.00	0.00
Georgia	0.00	0.00
Hawaii	0.00	0.00
Idaho	0.00	0.00
Illinois	0.00	0.00

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Indiana	0.00	0.00
Iowa	0.00	0.00
Kansas	0.00	0.00
Kentucky	0.00	0.00
Louisiana	0.00	0.00
Maine	0.00	0.00
Maryland	0.00	0.00
Massachusetts	0.00	0.00
Michigan	0.00	0.00
Minnesota	0.00	0.00
Mississippi	0.00	0.00
Missouri	0.00	0.00
Montana	0.00	0.00
Nebraska	0.00	0.00
Nevada	0.00	0.00
New Hampshire	0.00	0.00
New Jersey	0.00	0.00
New Mexico	0.00	0.00
New York	0.00	0.00
North Carolina	0.00	0.00
North Dakota	0.00	
Ohio	0.00	0.00
Oklahoma	0.00	0.00
Oregon	0.00	0.00
Pennsylvania	0.00	0.00

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Rhode Island	0.00	0.00
South Carolina	0.00	0.00
South Dakota	0.00	0.00
Tennessee	0.00	0.00
Texas	0.00	0.00
Utah	0.00	0.00
Vermont	0.00	0.00
Virginia	0.00	0.00
Washington	0.00	0.00
West Virginia	0.00	0.00
Wisconsin	0.00	0.00
Wyoming	0.00	0.00
Puerto Rico	0.00	0.00
Guam	0.00	0.00
Virgin Islands	0.00	0.00
TOTALS	0.00	0.00

SCHEDULE A-P **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 / 27

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input checked="" type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A. Full Name (Last, First, Middle Initial)

RUDOLPH W. GIULIANI

Mailing Address **1251 AVENUE OF THE AMERICAS**
49TH FLOOR

City **NEW YORK** State **NY** Zip Code **10020**

FEC ID number of contributing
federal political committee.

C **P00003251**

Name of Employer
GIULIANI PARTNERS

Occupation
CHAIRMAN & CEO

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

955000.00

Transaction ID : SA91-863

Date of Receipt

05 / **10** / **2013**

CONTRIBUTION

Amount of Each Receipt this Period

25000.00

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

25000.00

Total This Period (last page this line number only).....

25000.00

SCHEDULE A-P **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A. Full Name (Last, First, Middle Initial)

BANDWIDTH.COM

Mailing Address 4001 WESTON PKWY STE 100

City	State	Zip Code
CARY	NC	27513

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1014.83

Transaction ID : SA9890

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			14			2013			

VENDOR REFUND - UTILITIES

Amount of Each Receipt this Period

1014.83

SEE SCHEDULE D.

B. Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
---	---	---	---	---	---	---	---	---	---

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
---	---	---	---	---	---	---	---	---	---

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

1014.83

Total This Period (last page this line number only)

1014.83

SCHEDULE A-P **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A. Full Name (Last, First, Middle Initial)

MAMMOTH MARKETING GROUP LLC

Mailing Address 5750 BALCONES DRIVE

City	State	Zip Code
AUSTIN	TX	78731

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

11349.23

Transaction ID : SA1285

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			29			2013			

LIST RENTAL INCOME

Amount of Each Receipt this Period

4311.00

B. Full Name (Last, First, Middle Initial)

MAMMOTH MARKETING GROUP LLC

Mailing Address 5750 BALCONES DRIVE

City	State	Zip Code
AUSTIN	TX	78731

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

11349.23

Transaction ID : SA1285656

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			29			2013			

LIST RENTAL INCOME

Amount of Each Receipt this Period

365.00

C. Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
---	---	---	---	---	---	---	---	---	---

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

4676.00

Total This Period (last page this line number only)

4676.00

SCHEDULE B-P **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

Full Name (Last, First, Middle Initial)

A. RYAN MEDRANO

Mailing Address 5 EAST 22ND ST

City
NEW YORK

State
NY

Zip Code
10010

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 25 / 2013

Transaction ID : SB1589652

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. RYAN MEDRANO

Mailing Address 5 EAST 22ND ST

City
NEW YORK

State
NY

Zip Code
10010

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 24 / 2013

Transaction ID : SB16

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. RYAN MEDRANO

Mailing Address 5 EAST 22ND ST

City
NEW YORK

State
NY

Zip Code
10010

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 20 / 2013

Transaction ID : SB17

Amount of Each Disbursement this Period

2500.00

Subtotal Of Receipts This Page (optional).....

7500.00

Total This Period (last page this line number only).....

SCHEDULE B-P **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

Full Name (Last, First, Middle Initial)

A. ATCHLEY & ASSOCIATES

Mailing Address 6850 AUSTIN CENTER BLVD
STE 180

City AUSTIN State TX Zip Code 78731

Purpose of Disbursement
ACCOUNTING SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 25 / 2013

Transaction ID : SB0903821

Amount of Each Disbursement this Period

1227.50

Full Name (Last, First, Middle Initial)

B. BRACEWELL & GIULIANI

Mailing Address 1251 AVENUE OF THE AMERICAS

City NEW YORK State NY Zip Code 10020

Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 20 / 2013

Transaction ID : SB10

Amount of Each Disbursement this Period

7500.00

Full Name (Last, First, Middle Initial)

C. BRACEWELL & GIULIANI

Mailing Address 1251 AVENUE OF THE AMERICAS

City NEW YORK State NY Zip Code 10020

Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 25 / 2013

Transaction ID : SB11

Amount of Each Disbursement this Period

7500.00

Subtotal Of Receipts This Page (optional).....

16227.50

Total This Period (last page this line number only).....

SCHEDULE B-P **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

Full Name (Last, First, Middle Initial)

A. BRACEWELL & GIULIANI

Mailing Address 1251 AVENUE OF THE AMERICAS

City NEW YORK State NY Zip Code 10020

Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 24 / 2013

Transaction ID : SB9

Amount of Each Disbursement this Period

7500.00

Full Name (Last, First, Middle Initial)

B. CHASE BANK NA

Mailing Address PO BOX 36520

City LOUISVILLE State KY Zip Code 40233

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 15 / 2013

Transaction ID : SB18

Amount of Each Disbursement this Period

114.76

Full Name (Last, First, Middle Initial)

C. CHASE BANK NA

Mailing Address PO BOX 36520

City LOUISVILLE State KY Zip Code 40233

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 15 / 2013

Transaction ID : SB19

Amount of Each Disbursement this Period

101.24

Subtotal Of Receipts This Page (optional).....

7716.00

Total This Period (last page this line number only).....

SCHEDULE B-P **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

Full Name (Last, First, Middle Initial)

A. CHASE BANK NA

Mailing Address PO BOX 36520

City
LOUISVILLE

State
KY

Zip Code
40233

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 15 / 2013

Transaction ID : SB20

Amount of Each Disbursement this Period

93.77

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 7704 LEESBURG PKE

City
FALLS CHURCH

State
VA

Zip Code
22043

Purpose of Disbursement
DATA MANAGEMENT SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 25 / 2013

Transaction ID : SB12

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 7704 LEESBURG PKE

City
FALLS CHURCH

State
VA

Zip Code
22043

Purpose of Disbursement
DATA MANAGEMENT SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 24 / 2013

Transaction ID : SB12562

Amount of Each Disbursement this Period

500.00

Subtotal Of Receipts This Page (optional)..... 1093.77

Total This Period (last page this line number only).....

SCHEDULE B-P **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 7704 LEESBURG PKE

City
FALLS CHURCH

State
VA

Zip Code
22043

Purpose of Disbursement
DATA MANAGEMENT SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 20 / 2013

Transaction ID : SB14

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. COMPLIANCE CONSULTING LLC

Mailing Address PO BOX 365

City
MCLEAN

State
VA

Zip Code
22101

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 20 / 2013

Transaction ID : SB8

Amount of Each Disbursement this Period

750.00

Full Name (Last, First, Middle Initial)

C. NYC DEPARTMENT OF FINANCE

Mailing Address PO BOX 5040

City
KINGSTON

State
NY

Zip Code
12402

Purpose of Disbursement
NEW YORK CITY TAX

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 12 / 2013

Transaction ID : SB95631

Amount of Each Disbursement this Period

1950.00

Subtotal Of Receipts This Page (optional).....

3200.00

Total This Period (last page this line number only).....

SCHEDULE B-P **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

Full Name (Last, First, Middle Initial)

A. WELLS FARGO

Mailing Address PO BOX 563966

City CHARLOTTE State NC Zip Code 28262

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 01 / 2013

Transaction ID : SB2

Amount of Each Disbursement this Period

53.00

Full Name (Last, First, Middle Initial)

B. WELLS FARGO

Mailing Address PO BOX 563966

City CHARLOTTE State NC Zip Code 28262

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 03 / 2013

Transaction ID : SB3

Amount of Each Disbursement this Period

53.00

Full Name (Last, First, Middle Initial)

C. WELLS FARGO

Mailing Address PO BOX 563966

City CHARLOTTE State NC Zip Code 28262

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 01 / 2013

Transaction ID : SB4

Amount of Each Disbursement this Period

53.00

Subtotal Of Receipts This Page (optional).....

159.00

Total This Period (last page this line number only).....

SCHEDULE B-P **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

Full Name (Last, First, Middle Initial)

A. WELLS FARGO

Mailing Address PO BOX 563966

City
CHARLOTTE

State
NC

Zip Code
28262

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 11 / 2013

Transaction ID : SB5

Amount of Each Disbursement this Period

75.27

Full Name (Last, First, Middle Initial)

B. WELLS FARGO

Mailing Address PO BOX 563966

City
CHARLOTTE

State
NC

Zip Code
28262

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 13 / 2013

Transaction ID : SB6

Amount of Each Disbursement this Period

75.28

Full Name (Last, First, Middle Initial)

C. WELLS FARGO

Mailing Address PO BOX 563966

City
CHARLOTTE

State
NC

Zip Code
28262

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 11 / 2013

Transaction ID : SB7

Amount of Each Disbursement this Period

75.29

Subtotal Of Receipts This Page (optional).....

225.84

Total This Period (last page this line number only).....

36122.11

**SCHEDULE C-P
LOANS**Use separate schedule(s) for each category of
the Detailed Summary Page

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FOR LINE NUMBER: ☒ 19a ☐ 19b
(check only one)

NAME OF COMMITTEE (In Full)

Transaction ID : SC-1

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

LOAN SOURCE Full Name (Last, First, Middle Initial)**[PERSONAL FUNDS]**

Election: 2008

RUDOLPH W. GIULIANI-LOAN FROM PERSONAL FU

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1251 AVENUE OF THE AMERICAS

49TH FLOOR

City

NEW YORK

State

NY

ZIP Code

10020

\$250,000 Converted to Candidate Contribution; See
Line 17

Original Amount of Loan

500000.00

Cumulative Payment To Date

250000.00

Balance Outstanding at Close of This Period

250000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
04 / 09 / 2008

Date Due

M M / D D / Y Y Y Y

12/31/2014

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:

Subtotal Of Receipts This Page (optional).....▶

250000.00

Total This Period (last page this line number only).....▶

250000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D-P**DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate
schedule(s)
for each
numbered line)

PAGE 19 / 27

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ACT TELECONFERENCING SERVICES INCNature of Debt (Purpose):
UTILITIES

Mailing Address DEPT CH 17366

City State
PALATINEZip Code
IL 60055

Outstanding Balance Beginning This Period

14468.99

Transaction ID : SD-3

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

14468.99

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

AT&T MOBILITY LLCNature of Debt (Purpose):
TELEPHONE SERVICE

Mailing Address PO BOX 8405

City State
PHOENIXZip Code
AZ 85062

Outstanding Balance Beginning This Period

106691.17

Transaction ID : SD-4

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

106691.17

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

BANDWIDTH.COMNature of Debt (Purpose):
UTILITIES

Mailing Address 4001 WESTON PKWY STE 100

City State Zip Code
CARY NC 27513

Outstanding Balance Beginning This Period

9133.50

Transaction ID : SD-6

Amount Incurred This Period

-9133.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)

121160.16

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only).....

: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB
.

Form/Schedule: SD12
Transaction ID : SD-6

THE NEGATIVE AMOUNT INCURRED IS AS FOLLOWS: VENDOR REFUND (SEE SCHEDULE A): \$1,014.83
ADJUSTMENT OF AMOUNT FOR CHARGES NOT OWED BY THE COMMITTEE: \$8,118.67. AS OF THE DATE
OF THIS REPORT, THE COMMITTEE'S VENDOR BALANCE IS 0.00.

Form/Schedule:
Transaction ID:

SCHEDULE D-P**DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate
schedule(s)
for each
numbered line)

PAGE 21 / 27

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

BRABENDERCoxNature of Debt (Purpose):
MEDIA

Mailing Address 100 W STATION SQUARE DR STE 315

City State
PITTSBURGHZip Code
PA 15219

Outstanding Balance Beginning This Period

69135.83

Transaction ID : SD-7

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

69135.83

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

CHRIS MOTTOLA CONSULTINGNature of Debt (Purpose):
MEDIA

Mailing Address 1382 LAFAYETTE ST

City State
CAPE MAYZip Code
NJ 08204

Outstanding Balance Beginning This Period

41890.64

Transaction ID : SD-9

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

41890.64

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

CITATION SHARESNature of Debt (Purpose):
TRAVEL

Mailing Address FIVE AMERICAN LN

City
GREENWICHState Zip Code
CT 06831

Outstanding Balance Beginning This Period

10967.85

Transaction ID : SD-10

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10967.85

1) **SUBTOTALS** This Period This Page (optional)

121994.32

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D-P**DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

DELTA AIRELITENature of Debt (Purpose):
TRAVEL

Mailing Address 77 COMAIR BLVD

City State

ERLANGER

Zip Code

KY

41018

Outstanding Balance Beginning This Period

15021.48

Transaction ID : SD-15

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15021.48

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

GIULIANI PARTNERSNature of Debt (Purpose):
RENT

Mailing Address 5 TIMES SQUARE

City State

NEW YORK

Zip Code

NY

10036

Outstanding Balance Beginning This Period

59290.20

Transaction ID : SD-16

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

59290.20

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

GIULIANI SECURITY & SAFETY LLCNature of Debt (Purpose):
SECURITY SERVICE

Mailing Address 5 TIMES SQUARE

City

NEW YORK

State

NY

Zip Code

10036

Outstanding Balance Beginning This Period

141643.70

Transaction ID : SD-17

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

141643.70

1) **SUBTOTALS** This Period This Page (optional)

215955.38

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D-P**DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

GORDON C JAMES PUBLIC RELATIONSNature of Debt (Purpose):
TRAVEL

Mailing Address 4715 N 32ND ST STE 104

City State
PHOENIXZip Code
AZ 85018

Outstanding Balance Beginning This Period

5064.19

Transaction ID : SD-18

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5064.19

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

JON KRAUSHAR & ASSOCIATES INCNature of Debt (Purpose):
POLITICAL STRATEGY CONSULTING

Mailing Address 10 E 40TH ST STE 1308

City State
NEW YORKZip Code
NY 10016

Outstanding Balance Beginning This Period

72119.25

Transaction ID : SD-21

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

72119.25

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

LYRIS TECHNOLOGIES INCNature of Debt (Purpose):
WEB SERVICE

Mailing Address PO BOX 49023

City
SAN JOSEState Zip Code
CA 95161

Outstanding Balance Beginning This Period

5400.00

Transaction ID : SD-23

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5400.00

1) **SUBTOTALS** This Period This Page (optional)

82583.44

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D-P**DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate
schedule(s)
for each
numbered line)

PAGE 24 / 27

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

MCGRAW COMMUNICATIONS INCNature of Debt (Purpose):
UTILITIES

Mailing Address PO BOX 36204

City State
NEWARKZip Code
NJ 07188

Outstanding Balance Beginning This Period

27920.55

Transaction ID : SD-25

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

27920.55

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

OPERA NEW MEDIA LLCNature of Debt (Purpose):
WEB SERVICE

Mailing Address 1280 MASSACHUSETTS AVE STE 203

City State
CAMBRIDGEZip Code
MA 02138

Outstanding Balance Beginning This Period

110000.00

Transaction ID : SD-28

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

110000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ROMAN TECH LLCNature of Debt (Purpose):
COMPUTER SUPPORT

Mailing Address 8645 24TH AVE

City State Zip Code
BROOKLYN NY 11214

Outstanding Balance Beginning This Period

13500.00

Transaction ID : SD-31

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

13500.00

1) **SUBTOTALS** This Period This Page (optional)

151420.55

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D-P**DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)11
☒ 12

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

SCOTT HOWELL & COMPANY

Nature of Debt (Purpose):
MEDIA

Mailing Address 208 N MARKET ST STE 225

City State
DALLASZip Code
TX 75202

Outstanding Balance Beginning This Period

147884.24

Transaction ID : SD-32

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

147884.24

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

SPOUSE CONSULTING

Nature of Debt (Purpose):
POLITICAL STRATEGY CONSULTING

Mailing Address PO BOX 8635

City State
CHARLESTONZip Code
WV 25303

Outstanding Balance Beginning This Period

7200.00

Transaction ID : SD-34

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7200.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

TARRANCE GROUP INC

Nature of Debt (Purpose):
TRAVEL

Mailing Address 201 N UNION ST STE 410

City State
ALEXANDRIAZip Code
VA 22314

Outstanding Balance Beginning This Period

36170.19

Transaction ID : SD-36

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

36170.19

1) **SUBTOTALS** This Period This Page (optional)

191254.43

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D-P**DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

TAUGHANNOCK AVIATION CORPNature of Debt (Purpose):
TRAVEL

Mailing Address TOMPKINS COUNTY AIRPORT

66 BROWN RD

City
ITHACA

State

Zip Code

NY

14850

Outstanding Balance Beginning This Period

210307.00

Transaction ID : SD-37

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

210307.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

UPSTREAM COMMUNICATIONSNature of Debt (Purpose):
WEB SERVICE

Mailing Address 1609 SHOAL CREEK BLVD # 203

City
AUSTIN

State

Zip Code

TX

78701

Outstanding Balance Beginning This Period

10900.00

Transaction ID : SD-39

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10900.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

VERIZON WIRELESSNature of Debt (Purpose):
TELEPHONE SERVICE

Mailing Address PO BOX 408

City
NEWARK

State

NJ

Zip Code

07101

Outstanding Balance Beginning This Period

236045.23

Transaction ID : SD-40

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

236045.23

- 1) **SUBTOTALS** This Period This Page (optional)
- 2) **TOTALS** This Period (last page this line number only)
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....
- 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only).....

457252.23

SCHEDULE D-P**DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

VORNADO OFFICE MGMT LLCNature of Debt (Purpose):
RENT/UTILITIES

Mailing Address 40 FULTON ST

City State
NEW YORKZip Code
NY 10038

Outstanding Balance Beginning This Period

106462.82

Transaction ID : SD-41

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

106462.82

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

WEST MERIDIAN LLCNature of Debt (Purpose):
MESSAGE PHONE CALLS

Mailing Address 914 164TH ST SE # 343

City State
MILL CREEKZip Code
WA 98012

Outstanding Balance Beginning This Period

38631.56

Transaction ID : SD-42

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

38631.56

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

XO COMMUNICATIONS LLCNature of Debt (Purpose):
TELEPHONE SERVICE

Mailing Address 14239 COLLECTIONS CENTER DR

City State Zip Code
CHICAGO IL 60693

Outstanding Balance Beginning This Period

11139.65

Transaction ID : SD-43

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11139.65

1) SUBTOTALS This Period This Page (optional)	156234.03
2) TOTALS This Period (last page this line number only)	1497854.54
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	250000.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only).....	1747854.54